

## **Supplementary Information**

### **Cardiac Mitofusin-1 is Reduced in Non-responding Patients with Idiopathic Dilated Cardiomyopathy**

Yung Ting Hsiao<sup>1, 2\*</sup>, Ippei Shimizu<sup>1, 3\*, \*\*</sup>, Takayuki Wakasugi<sup>1</sup>, Yohko Yoshida<sup>1, 3</sup>, Ryutaro Ikegami<sup>1</sup>, Yuka Hayashi<sup>1</sup>, Masayoshi Suda<sup>1</sup>, Goro Katsuumi<sup>1</sup>, Masaaki Nakao<sup>1</sup>, Takuya Ozawa<sup>1</sup>, Daisuke Izumi<sup>1</sup>, Takeshi Kashimura<sup>1</sup>, Kazuyuki Ozaki<sup>1</sup>, Tomoyoshi Soga<sup>4</sup>, Tohru Minamino<sup>1, 2, 5\*\*</sup>

<sup>1</sup>*Department of Cardiovascular Biology and Medicine, Niigata University Graduate School of Medical and Dental Sciences, Niigata 951-8510, Japan*

<sup>2</sup>*Japan Agency for Medical Research and Development-Core Research for Evolutionary Medical Science and Technology (AMED-CREST), Japan Agency for Medical Research and Development, Tokyo, Japan.*

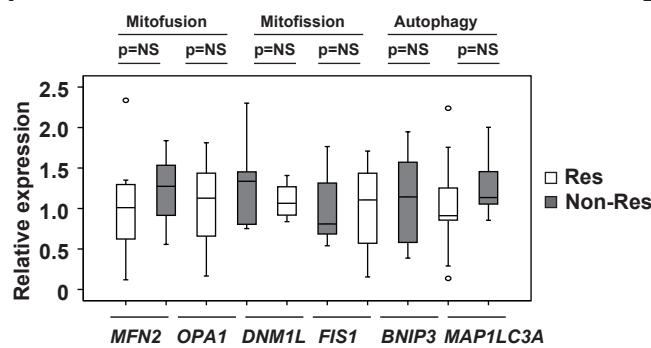
<sup>3</sup>*Division of Molecular Aging and Cell Biology, Niigata University Graduate School of Medical and Dental Sciences, Niigata 951-8510, Japan*

<sup>4</sup>*Institute for Advanced Biosciences, Keio University, Yamagata 997-0052, Japan*

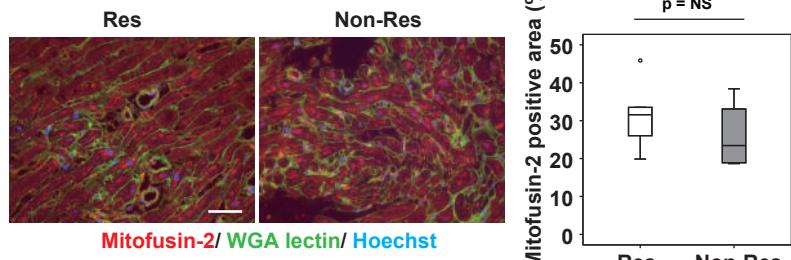
<sup>5</sup>*Department of Cardiovascular Biology and Medicine, Juntendo University Graduate School of Medicine, Tokyo 113-8421, Japan*

## Supplemental Figure 1

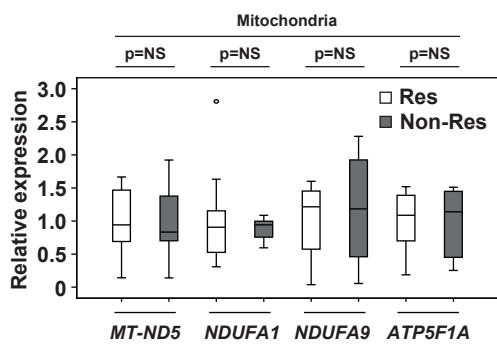
**A**



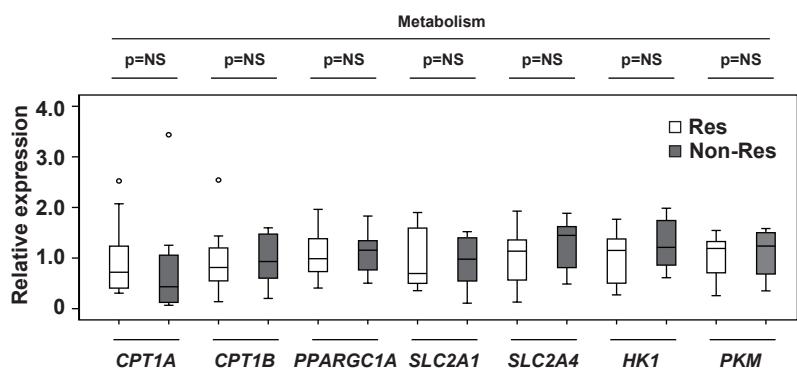
**B**



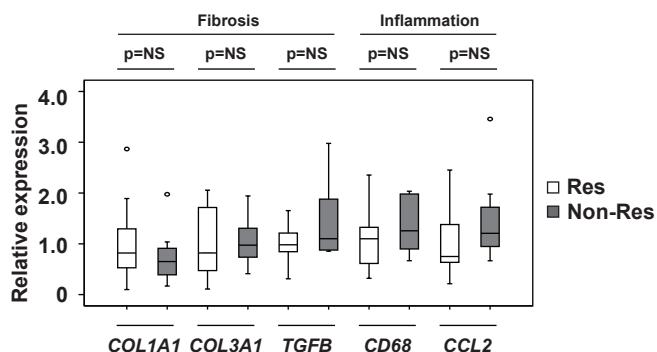
**C**



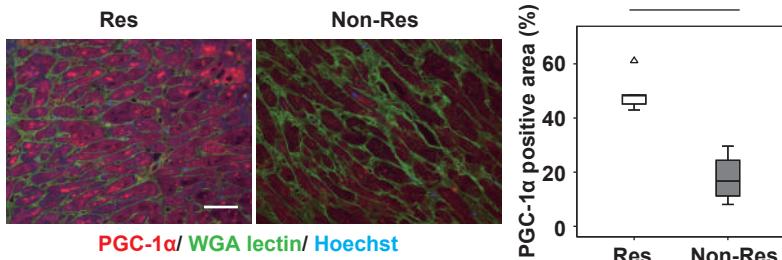
**D**



**E**



**F**

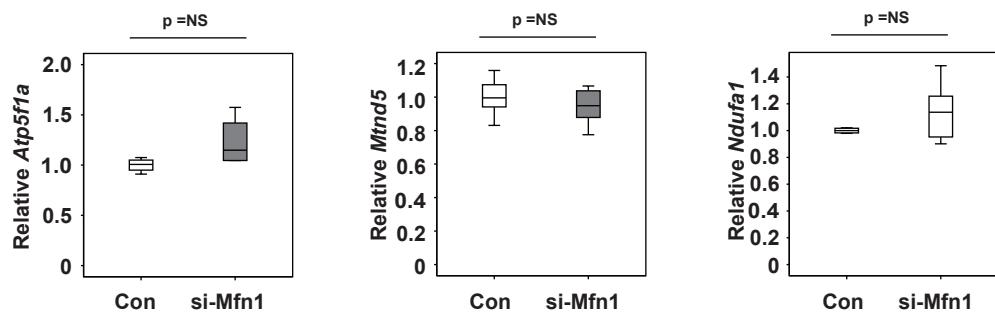


### **Supplemental Figure 1 Examinations of human samples**

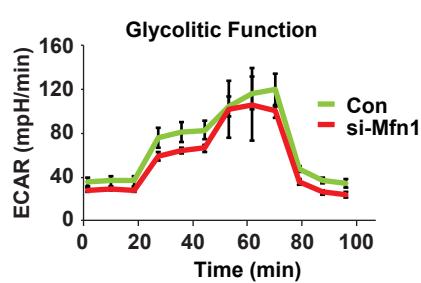
(A, C, D, E) Quantitative PCR of molecules related to mitofusion, mitofission, and autophagy (A), mitochondria (C), metabolism (D), fibrosis and inflammation (E) cardiac tissue of responders (Res) and non-responders (Non-Res). Outlier and abnormal values were excluded by boxplot (SPSS) for further statistical analysis. Some samples were not-detected, and also excluded from the analyses. The following numbers of samples for various molecules were analyzed: (*MFN2* (n=13, 8); *OPA1* (n=14, 8); *DNM1L* (n=4, 5); *FIS1* (n=14, 8); *BNIP3* (n=14, 8); *MAP1LC3A* (n=12, 7); *MT-ND5* (n=14, 8); *NDUFA1* (n=11, 6); *NDUFA9* (n=14, 8); *ATP5F1A* (n=14, 8); *CPT1A* (n=13, 7); *CPT1B* (n=13, 8); *PPARGC1A* (n=14, 8); *SLC2A1* (GLUT1) (n=14, 8); *SLC2A4* (GLUT4) (n=14, 8); *HK1* (n=14, 8); *PKM* (n=14, 8); *COL1A1* (n=13, 6); *COL3A1* (n=14, 8); *TGFB* (n=14, 8); *CD68* (n=12, 7), and *CCL2* (n=13, 6). (B, F) Immunofluorescence study for Mitofusin-2 (B) or PGC-1 $\alpha$  (F). Right panels indicate positive area of respective molecules (B)(n=5,4)(F)(n=5,4). Scale bar=50 $\mu$ m. For study in Supplemental Figure 1B, an outlier n=1 in Res group, in Supplemental Figure 1F, an abnormal value n=1 in Res group were excluded from the analyses. Data were analyzed by two-tailed Student's t-test. \*P<0.05, \*\*P<0.01. Results are shown as mean  $\pm$  SEM. NS = not significant. Small circle indicates outlier, triangle indicates abnormal value.

## Supplemental Figure 2

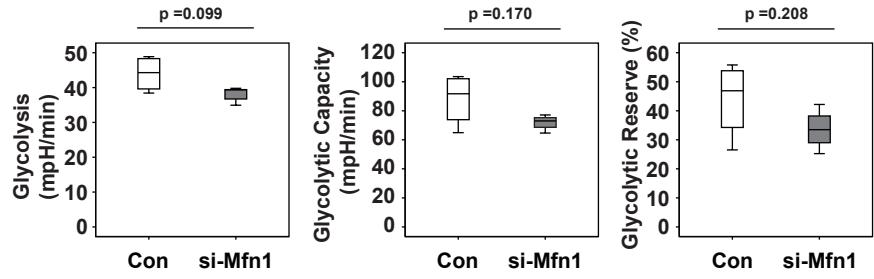
**A**



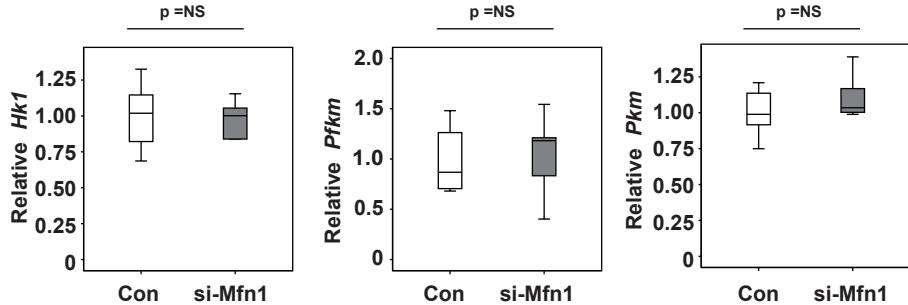
**B**



**C**



**D**

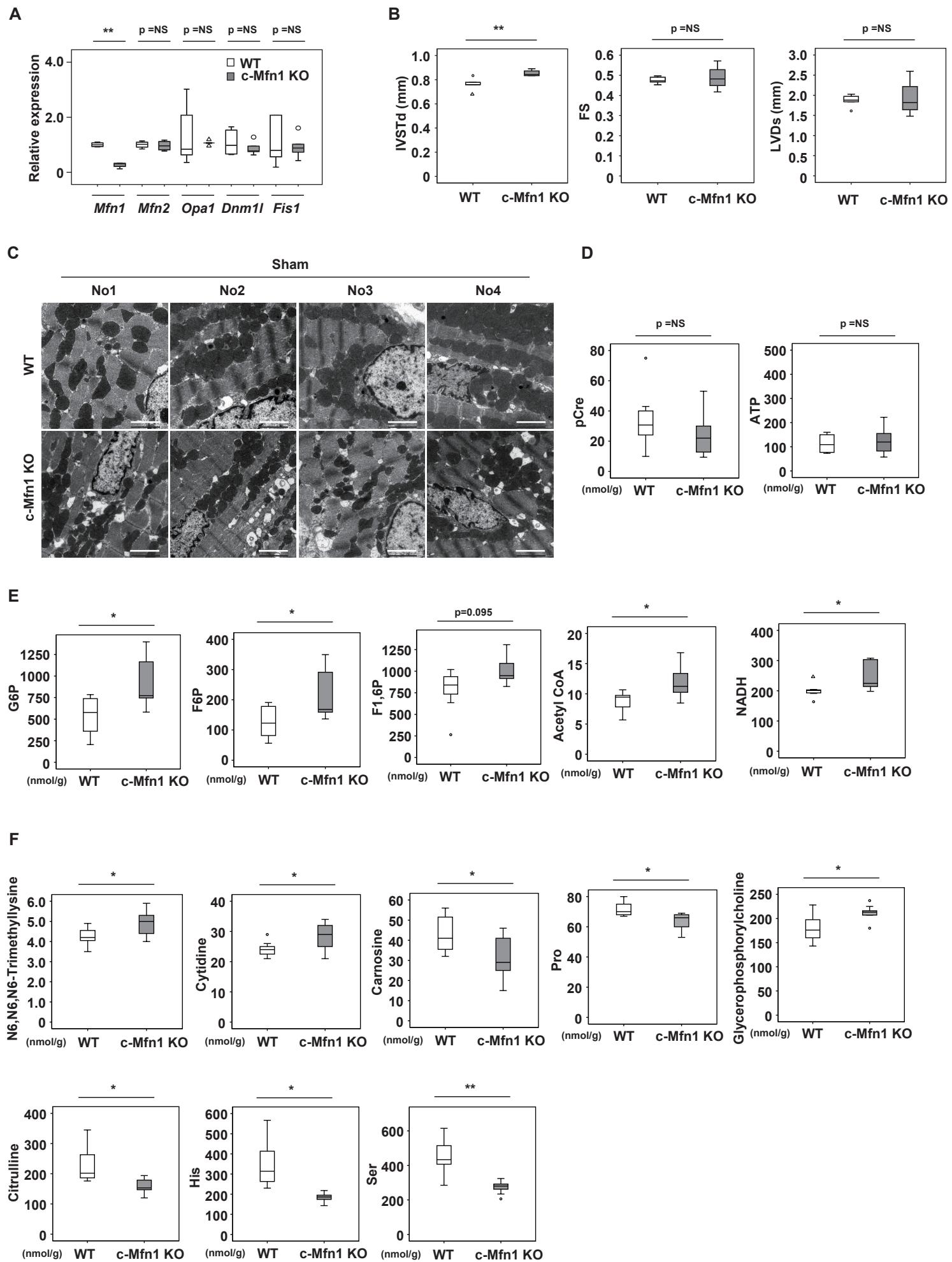


## **Supplemental Figure 2 Effects of si-Mfn1 in NRVMs**

(A) Quantitative PCR of *Atp5fa1* (n=4, 6), *Mtnd5* (n=5, 6) and *Ndufa1* (n=4, 6) in NRVMs after introduction of control si-RNA (Con) or si-Mfn1. Abnormal values (n=1 in *Atp5fa1* (Con) and *Ndufa1* (Con)) were excluded by boxplot (SPSS) for further statistical analysis.

(B, C) Evaluation of glycolysis with the Seahorse extracellular flux analyzer (B) and glycolysis (n=4, 5), glycolytic capacity (n=4, 4), and glycolytic reserve (n=4, 4) (C) in NRVMs after introduction of control si-RNA (Con) or si-Mfn1. Abnormal values (n=1 in glycolytic capacity (si-Mfn1) and glycolytic reserve (si-Mfn1)) were excluded by boxplot (SPSS) for further statistical analysis. (D) Quantitative PCR of *Hk1* (n=5, 6), *Pfkm* (n=5, 6) and *Pkm* (n=4, 6) in NRVMs after introduction of control si-RNA (Con) or si-Mfn1. An abnormal value (n=1 in *Pkm* (Con)) was excluded by boxplot (SPSS) for further statistical analysis. Data were analyzed by two-tailed Student's t-test. \*P<0.05, \*\*P<0.01. Results are shown as mean ± SEM. NS = not significant. Small circle indicates outlier, triangle indicates abnormal value.

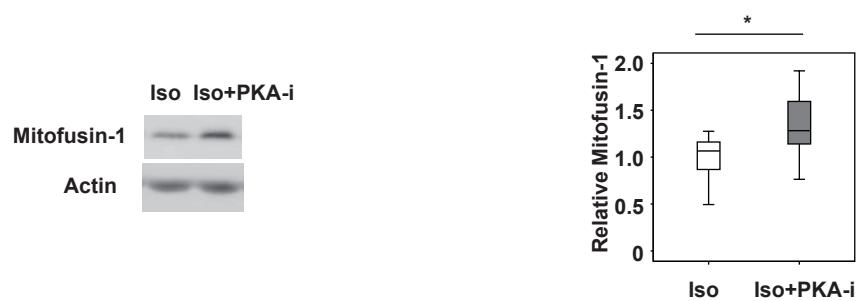
### Supplemental Figure 3



### **Supplemental Figure 3 PCR and metabolic analyses in c-Mfn KO mice**

(A) Quantitative PCR of *Mfn1* (n=4, 4), *Mfn2* (n=4, 4), *Opa1* (n=4, 5), *Dnm1l* (n=4, 5), *Fis1* (n=4, 5) in cardiac tissues of wild type (WT) or c-Mfn1 KO mice. (B) UCG data of WT and c-Mfn1 KO mice at baseline. Interventricular septal thickness at end-diastole (IVSTd)(n=5, 4), Fractional shortening (FS) (n=5, 4) and left ventricular systolic dimension (LVDs) (n=5, 4) were analyzed. (C) Transmission EMs of cardiac tissues from WT and c-Mfn1 KO mice at baseline. No. C1-4 panels are from different mice. (D) Metabolomic study showing pCre or ATP levels in cardiac tissues of indicated mice at baseline (n=7, 9). (E, F) Metabolomic study showing anions (glucose 6-phosphate (G6P) (n=7, 9), fructose 6-phosphate (F6P) (n=7, 9), fructose 1,6-bisphosphate (F1,6P) (n=7, 9), acetylCoA (n=7, 9) and NADH (n=6, 9))(E), and cations N6,N6,N6-trimethyllysine (n=7, 9), cytidine (n=7, 9), carnosine (n = 7, 9), proline (Pro) (n=7, 9), glycerophosphorylcholine (n=7,8), citrulline (n=7,9), histidine (His) (n=7, 9) and serine (Ser) (n=7, 9))(F) of indicated mice. Abnormal values (n=1 in WT (NADH), n=1 in c-Mfn1 KO group (glycerophosphorylcholine)), and outliers (n=1 in WT F1,6P, n=2 in WT NADH, n=1 in WT cytidine, n=2 in c-Mfn1 KO glycerophosphorylcholine, n=1 in c-Mfn1 KO Ser) were excluded by boxplot (SPSS) for further statistical analysis. Data were analyzed by two-tailed Student's t-test. \*P<0.05, \*\*P<0.01. Results are shown as the mean ± SEM. NS = not significant. Small circle indicates outlier, triangle indicates abnormal value.

## Supplemental Figure 4

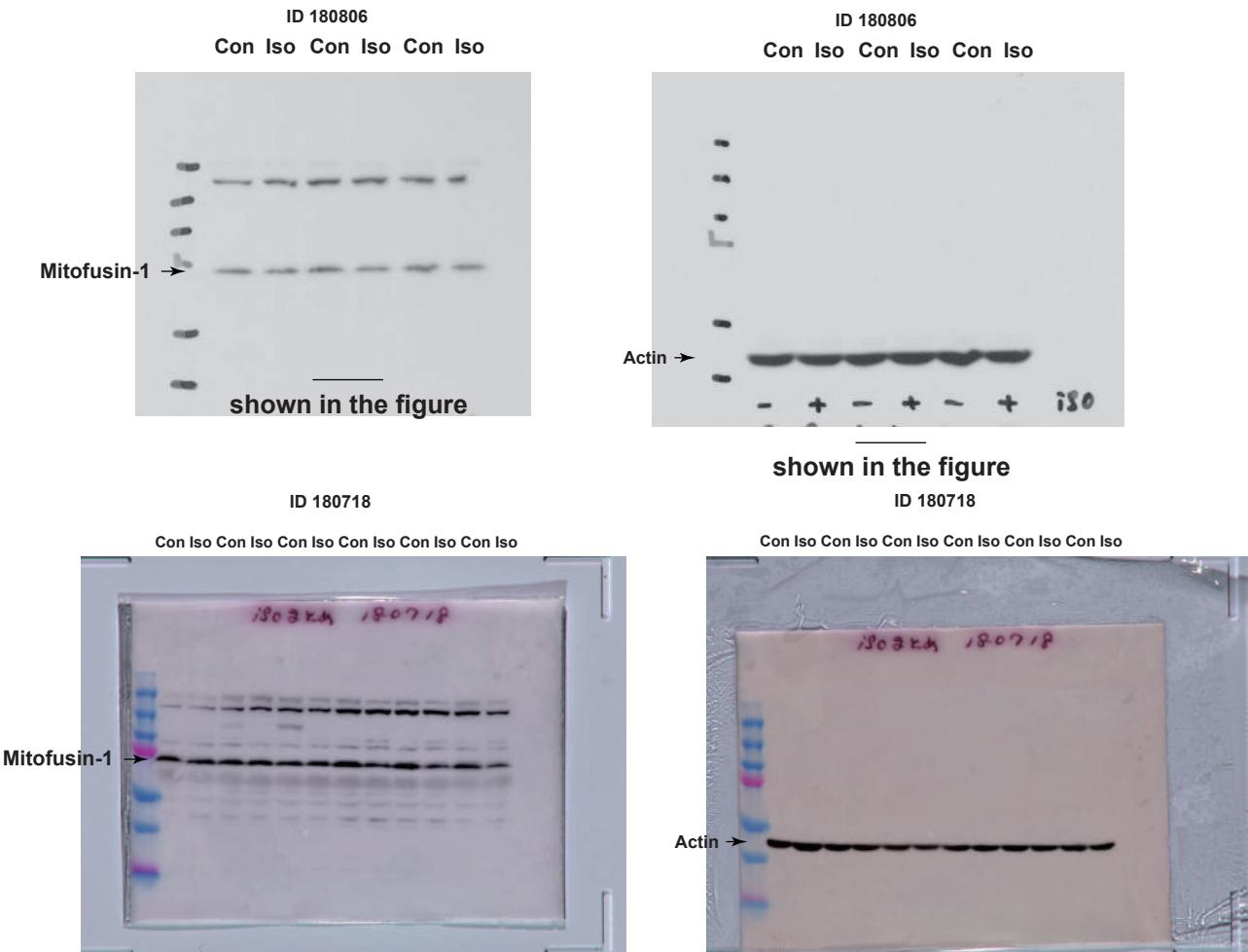


#### **Supplemental Figure 4 Effects of isoproterenol on Mfn1 expression**

Western blot analysis of Mfn1 in NRVMs administrated with isoproterenol (Iso) or isoproterenol+PKA inhibitor (Iso+PKA-i). Right panel indicates relative Mfn1 levels ( $n=11, 10$ ). Data were analyzed by two-tailed Student's t-test. \* $P<0.05$ , \*\* $P<0.01$ . Results are shown as mean  $\pm$  SEM. NS = not significant. Small circle indicates outlier, triangle indicates abnormal value.

# Full blots

**Figure 4**



**Supplementary Figure 4**

